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CONFIRMATION NO. 1908

<b>SERIAL NUMBER</b> 10/596,034	<b>FILING or 371(c) DATE</b> 01/31/2007 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> 3869/029 US		
<b>APPLICANTS</b> David Bassin, Congee, AUSTRALIA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AU04/01651 11/25/2004 Yes L.L. which claims benefit of 60/525,219 11/26/2003 None L.L. <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/06/2007						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/LATOYA M LOUIS/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWINGS</b> 7	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> GOTTLIEB RACKMAN & REISMAN PC 270 MADISON AVENUE 8TH FLOOR NEW YORK, NY 10016-0601 UNITED STATES						
<b>TITLE</b> Methods and apparatus for the sytematic control of ventilatory support in the presence of respiratory insufficiency						
<b>FILING FEE RECEIVED</b> 1180	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		